STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

I. Name of Lobby	yist(s) Rich	nard Sigel			
II. Name of lobby	yist's partne	ership, firm or c	orporation, if any	:	
			ublic Strateg	ries, LLC	
	(Name of part	nership, firm or co	orporation)		
900 Elm Stre	et, P.O.	Box 326	Mancheste	nH	03105-0326
Business Address:	(Street)		(Town/City)	(State)	(Zip Code)
(603) 628-148	39	(603)	625-5650	e-mail rich	nard.sigel@mclanegps.com
(Telepho	ne)	,	(Fax)		
			e separate reports ot attributable to		ou may file a separate report for
All reportable	transactions	occurring in the	months prior to the	reporting date relative	e to the following client:
Well Sense H					
OD	(Full N	ame of Client as it	appears on the Lobb	yist Registration Form)	
OR	····	haardaa talahadaa (:1 J: 41 1-11	:-4?- 6!t->4b- 1-1	
unrelated to any p			including the lobby	ist's family), or the for	bying firm listed below which are
IV. Date of Repo		26, 2017 date of registration	n to 3/31/17	July 26, 2017 activity from 4/1/17 to 6/30/17	
		oer 25, 2017 🛣 From 7/1/17 to 9/36	0/17	January 31, 201 activity from 10/1/17 to	
	ked, complete			ansactions made si Secretary of State's Off	nce the last report. Gice, State House, Room 204,
VI. Check if addi	itional renoi	rts are attached	<u>.</u>		
	-			Addendum A- Fees a	and Expenses
☐ If you have pa Expense Reimburs		arium or reimbur	rsed expenses, you	must file Addendum F	3– Report of Honorariums or
🕱 If you, your fi	irm, or your	family has made	political contribution	ons, you must file Add	lendum C- Political Contributions
and complete to the	15, RSA 15-Ine best of my by	B, RSA 14-C and knowledge and			t the foregoing information is true \(\frac{1}{\text{Date}} \)
(Print Name of lo					



STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

•							
I. Name of Lobbyist(s) Richard Sigel							
II. Name of lobbyist's partnership, firm or corporation, if any:							
McLane Middleton Government & Public Strategies, LLC							
(Name of partnership, firm or corporation)							
III. Name of Client Well Sense Health Plan	Date	10-25-17					
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	relations, o	r public relations services					
a) Total of all fees received in this reporting period	a) \$	24,000.00					
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ ear)	48,000.00					
c) Total of all fees received to date (Add lines a and b)	c) \$	72,000.00					
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00					
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if may be filed a aggregate expenses; (b) le: meals pu ss than \$10 ed with a va- orting period ae of greate er than \$25, expense re	expenditures are made by d for the lobbyist(s)/firm. total of all expenses paid the aggregate total of all rchased during a business that is given to the person lue of \$25.00 or less); and of greater than \$25.00 for r than \$25, purchase of a but not greater than \$50, simbursement, or political					
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.b) Total aggregate of expenditures during this reporting period, not reported	a) \$	24,000.00					
in a), of \$25 or less.	b) \$	0.00					
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00					

d) Total expenses for this reporting period	d) \$	24,000.00
(Add lines a, b and c)		
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	48,000.00
f) Total of all expenses year to date	f) \$	72,000.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees d	luring this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the for	egoing information
\wedge		
(Signature of lobby) st)	(Da	ate)
Richard Sigel (Print Name of lobbyist)		